Lt. Governor

INFORMATIONAL LETTER NO.1865-FFS

Governor

DATE: December 8, 2017

TO: Iowa Medicaid Health Homes (HH) and Integrated Health Home (IHH)

Providers

APPLIES TO: Fee-for-Service (FFS)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: AmeriHealth Caritas Iowa, Inc. (AmeriHealth) Withdrawal – HH and IHH

Services

EFFECTIVE: December 1, 2017

As announced in Informational Letter (IL) 1848-MC- FFS-D¹, effective December 1, 2017, AmeriHealth will no longer be an available Managed Care Organization (MCO) option through the IA Health Link program.

Members were notified that they were able to make a choice to change their MCO. This has changed. Please see IL 1862-MC- FFS-D. Members who self-elected Amerigroup lowa, Inc. on or before November 16, 2017, will temporarily transition to Iowa Medicaid FFS until Amerigroup Iowa, Inc. has capacity.

This IL addresses those Medicaid members that will temporarily transition into FFS and that are enrolled in a HH. Providers that enroll members assigned to a MCO must follow the MCO's processes.

Member Continuity of Care:

All currently enrolled Iowa Medicaid providers can continue to see Medicaid members and receive reimbursement. FFS members will receive coverage directly through lowa Medicaid. HH providers will be paid the Medicaid reimbursement rates shown on the DHS fee schedule² web page.

HH Access through the Iowa Medicaid Portal Access (IMPA):

Each HH must have staff with access to the IMPA³ system to allow for enrolling and managing FFS HH members for the purpose of HH FFS claim payment.

https://secureapp.dhs.state.ia.us/impa/Default.aspx

https://dhs.iowa.gov/sites/default/files/1848-MC-FFS-D AmeriHealth Caritas Withdraw.pdf

http://dhs.iowa.gov/ime/providers/csrp/fee-schedule

Member Enrollment through IMPA:

Medicaid FFS members receiving HH services must be enrolled with the appropriate HH through IMPA. For those former AmeriHealth members that will now be transitioned to Medicaid FFS coverage beginning December 1, 2017, the IME will complete the member's enrollment with the assigned HH in IMPA.

The IME will enroll the HH members that have transitioned from AmeriHealth to Medicaid FFS into IMPA. This is will enable the December Per Member Per Month (PMPM) payment. The IME will enter the payment tier, a placeholder diagnosis code and a placeholder assessment date for each member that will be enrolled in IMPA. During the month of December, each HH should review the FFS member enrollment in IMPA and enter the correct diagnosis and assessment dates for each of the HH's assigned members.

Important Reminder:

Only those members who are enrolled through IMPA as of the 20th of each month are eligible for an HH PMPM payment for the following month. There are no retroactive enrollments or tier changes through IMPA. All additions and changes must be done by the 20th of the month to allow for appropriate payment for the subsequent month. HHs should also verify that the correct tier is included in IMPA, because the IME will only pay the IHH claim if the billed tier matches the tier found in IMPA.

Other helpful tools may be found on the DHS <u>Chronic Condition Health Home</u>⁴ web page and the <u>Integrated Health Homes</u>⁵ web page.

If you have any questions, please contact Joyce Vance at jvance@dhs.state.ia.us or call 515-974-3050.

⁴ https://dhs.iowa.gov/ime/providers/enrollment/healthhome

http://dhs.iowa.gov/ime/providers/integrated-home-health